

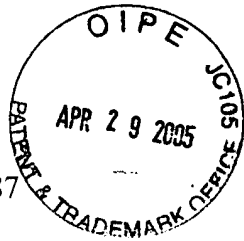
In re Application of:

KOJI NAKAGIRI et al.

Application No.: 09/703,687

Filed: November 2, 2000

For: PRINT CONTROL METHOD AND APPARATUS



Docket No.

00862.022039.

Examiner: D. Tran

Group Art Unit: 2622

Date: Monday, April 25, 2005

Mail Stop Issue Fee
THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment After Allowance in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

| CLAIMS AS AMENDED | | | | | | |
|--|--|-------|--|-------------------------|------------------|-------------------|
| | (2) CLAIMS REMAINING AFTER AMENDMENT | | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | * 27 | MINUS | ** 27 | = 0 | x \$25 \$50 | 0 |
| INDEP. CLAIMS | * 6 | MINUS | *** 6 | = 0 | x \$100 \$200 | 0 |
| Fee for Multiple Dependent claims \$180°/\$360 | | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT--- | | | | | | -0- |

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on

April 25, 2005
(Date of Deposit)

Frank L. Cire, Reg. No. 42,419
(Name of Attorney for Applicant)

April 25, 2005
Date of Signature

☐ Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$_____ is enclosed.

☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

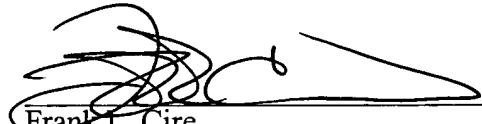
☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.

☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicants' undersigned attorney may be reached in our Costa Mesa, CA office at (714) 540-8700. All correspondence should continue to be directed to our address given below.

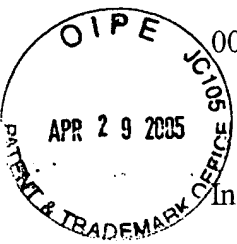
Respectfully submitted,


Frank L. Cire
Attorney for Applicants
Registration No. 42,419

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200

Form #120

CA_MAIN 95190v1



00862.022039.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
: Examiner: D. Tran
KOJI NAKAGIRI et al.)
: Group Art Unit: 2622
Application No.: 09/703,687)
: Confirmation No. 2907
Filed: November 2, 2000)
:
For: PRINT CONTROL METHOD)
AND APPARATUS : Monday, April 25, 2005

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AFTER ALLOWANCE

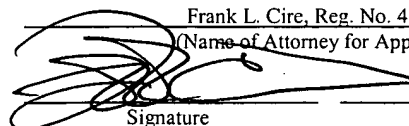
Sir:

Prior to issuance, please amend the above-identified application as follows:

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on

April 25, 2005
(Date of Deposit)

Frank L. Cire, Reg. No. 42,419
(Name of Attorney for Applicant)


Signature

April 25, 2005
Date of Signature